





IN THE U.S. PATENT AND TRADEMARK OFFICE Express Mail Label No. EM 382 268 899 US Attorney Docket No.: 4100.P0423US January 15, 2010

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Sir:

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the below-identified pending utility or plant application:

Serial No.: 10/587 620 Filing Date: May 8, 2007 Confirmation No.: 9965

Title: TEAT RUBBER

Inventors: Jakob Maier JUN and Wilfried HATZACK

Group: 3643

Examiner: Hayes

Please direct correspondence to the address associated with the following customer number:

23474 FLYNN, THIEL, BOUTELL & TANIS, P.C.

- 1. Submission required under 37 CFR §1.114
 - a. [X] An amendment under 37 CFR §1.116 previously filed on November 10, 2009 was not entered. Please enter before calculating the filing fee.
 - [X] Enclosed is/are: b.
 - i. [] Amendment/Response (please enter before calculating the filing fee)
 - ii. [] Affidavit(s)/Declaration(s)
 - iii. [] Information Disclosure Statement (IDS)
 - iv. [X] Acknowledgment Post Card
 - v. [X] Letter to Examiner.
- Miscellaneous 2.
 - [X] Small entity status is claimed. See 37 CFR 1.27.

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- 3. Fees (The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed).
 - a. [X] The RCE fee and any filing fee for claims are calculated as shown below, after entering any amendments which this transmittal indicates are to be entered prior to such calculation:

1	No.	No.	()	RATE	(X)	
For F	iled	Extra	LG Entity		SM Entity	Fee
Basic RCE Fee			\$810.00		\$405.00	\$405.00
Total Claims (10 - 2	20 = 0)	x \$ 52.00		x \$ 26.00	
Indep. Claims (1 -	3 = 0)	x 220.00		x \$110.00	
[] Multiple Dep.	Clain	n	+ \$390.00		+ \$195.00	
* * * TOTAL FILING FEE * * *						\$ 405.00

- b. [X] Pursuant to 37 CFR §1.136(a), please extend the shortened period for response by two months. The extension fee is: \$245.00.
- d. [X] A check for \$650.00 is enclosed to cover fees.
- e. [] Please charge my Deposit Account No. 06-1382 in the amount of \$_____ .
- f. [X] The Commissioner is hereby authorized to charge payment of any additional application processing fees under 37 CFR §1.17 associated with this communication or to credit any overpayment to Deposit Account No. 06-1382.

The undersigned is: [X] an attorney of record

[] acting under 37 CFR §1.34.

Please direct all telephone calls to the undersigned at telephone number (269) 381-1156.

Respectfully submitted, FLYNN, THIEL, BOUTELL & TANIS, P.C.

Terryence F. Chapman

TFC/smd

Reg. No. 32 549

Encl: Listed above